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				INVENTOR'S NAME		
				Street Address		
SAIDMAN, STERNE, KESSLER & GOLDSTEIN 1225 CONNECTICUT AVENUE WASHINGTON, DC 20036				City, State and ZIP Code		
				CO-INVENTOR'S NAME		
				Street Address		
				City, State and ZIP Code Check if additional changes are on reverse side		
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5. ASSIGNMENT DATA TO BE PRINT (1) NAME OF ASSIGNEE:	ED ON THE PATENT (print of	or type)	6a	. The following fees are enclosed:	10	
2 Brigham & Women's Hospital				Issue Fee Advanced Order - #		
(2) ADDRESS: (City & State or Country) 6b.				. The following fees should be charged to:	(Minimum of 10)	
75 Francis Street				DEPOSIT ACCOUNT NUMBER(Enclose Part C)		
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION BOSTON, MA 02115				Issue Fee Advanced Order - #	•	
This application is NOT assigned.				Any Deficiencies in Enclosed Fees	(Minimum of 10)	
Assignment proviously submitted to the Patent and Trademark Office				COMMISSIONER OF PATENTS AND TRADEN	ARKS is requested to	
☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.				oly the issue Ree to the application identified above nature of party in interestrot record) Reg	(Date) 1-3-91	
previously submitted to the PTO or is being submitted under separate cover. Completion of				avid K.S. Cornwell 31,94	4 1/3/91	
				NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party In Interest as shown by the records of the Patent and Trademark Office.		

PART B - ISSUE FEE TRANSMITTAL